

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90102 042 \*\*\*150.00

DOCUMENT # 248266

1. Entity Name

RUSKIN PACKAGING INC



Principal Place of Business

910 NW 22ND ST  
MIAMI FL 33127

Mailing Address

910 NW 22ND ST  
MIAMI FL 33127

NEW ↓



2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

SAME

City & State

Zip

Country

3. Mailing Address

Mr. Andy Garcia Jr.  
24 Dockside Ln. # 434  
Key Largo, FL 33037

Zip

Country

USA

1st MOORE

CR2E034 (10/06)

4. FEI Number

59-0932444

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

Mr. Andy Garcia Jr.  
24 Dockside Ln. # 434  
Key Largo, FL 33037

7. Name and Address of New Registered Agent

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Andy Garcia*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-30-07

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	GARCIA, ANDREW JR	
STREET ADDRESS	910 NW 22ND ST.	
CITY - ST - ZIP	MIAMI FL 33127	
TITLE	S	<input type="checkbox"/> Delete
NAME	GARICA, ANDREA JO	
STREET ADDRESS	910 NW 22ND ST	
CITY - ST - ZIP	MIAMI FL 33127	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ANDREW, GARCIA III	
STREET ADDRESS	910 NW 22ND STREET	
CITY - ST - ZIP	MIAMI FL 33127	
TITLE	T	<input type="checkbox"/> Delete
NAME	GARCIA, CATHERINE M	
STREET ADDRESS	910 NW 22ND ST	
CITY - ST - ZIP	MIAMI FL 33127	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Andy Garcia Pres*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-07 (305)3672629

Date

Daytime Phone #